

AMENDMENT / RESPONSE TRANSMITTAL

Applicant : Raffi Codilian
 App. No. : 10/008,763
 Filed : November 30, 2001
 For : SHOCK EVENT ERROR
 LOGGING IN A DISK DRIVE
 Examiner : Mitchell R. Slavitt
 Art Unit : 2651

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

June 16, 2004
 (Date)

Andrew M. Douglas
 Andrew M. Douglas, Reg. No. 51,212

RECEIVED

JUN 29 2004

Technology Center 2600

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:


- (X) Response to Office Action Mailed February 17, 2004 in 16 pages.
- (X) Associate Power of Attorney.

The fee has been calculated as shown below:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Total Claims	33 - 33 = 0	1202 (\$18)	0 x 18 =	\$
Independent Claims	10 - 3 = 7	1201 (\$86)	7 x 86 =	\$692
Multiple Claim		1203 (\$290)		\$
1 Month Extension		1251 (\$110)		\$110
2 Month Extension		1252 (\$420)		\$
3 Month Extension		1253 (\$950)		\$
			TOTAL FEE DUE	\$802

- (X) An extension of time is hereby requested by payment of the appropriate fee indicated above.
- (X) A check in the amount of \$802 is enclosed.
- (X) A return prepaid postcard addressed to Knobbe, Martens, Olson & Bear LLP.
- (X) A return prepaid postcard addressed to Western Digital Technologies, Inc.

- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



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